

ACTIVITY REQUIREMENTS

DOMESTIC 3.7A REQUIREMENTS

DESC-PHB

POC:

DEPT

PPN: 3.7A

DUE DATE: 11/01/2004

ACTIVITY NAME

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I CERTIFY QUANTITIES, METHODS OF DELIVERY
SIGNED:
NAME/RANK/GRADE:
CONTACT PERSON:
PHONE:
DSN:
COMMERCIAL:

☐ NO CONSUMPTION DATA AVAILABLE AT DESTINATION

LINE ITEM

CITY

CLEVELAND

STATE

OH

COUNTRY

USA

SPECIFIC LOCATION:

Coast Moorings 1055 East 9th Street

DELIVERY NOTES:

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PRODUCT SHORT NAME

Marine Gas Oil

TOTAL QUANTITY

40,000

DELIVERY METHOD

TT

MINIMUM QUANTITY

1,000

AVG. QUANTITY

0

HAVE A QUESTION? CALL DAZELENE FORTE, CONTRACT SPECIALST. PHONE (703) 767-0193 FAX (703) 767-8506

RETURN TO DEFENSE ENERGY SUPPORT CENTER-PHB, 8725 JOHN J. KINGMAN RD., SUITE 4950, ATTN: DESC-PHB Room 3918, FT. BELVOIR, VA 22060-6222